

ARTICLE 1. DEFINITIONS

R9-4-101. Definitions, General

In this Chapter, unless otherwise specified:

1. “Admitted” means the same as in A.A.C. R9-10-201.
2. “Business day” means any day of the week other than a Saturday, a Sunday, a legal holiday, or a day on which the Department is authorized or obligated by law or executive order to close.
3. “Calendar day” means any day of the week, including a Saturday or a Sunday.
4. “Clinical laboratory” has the same meaning as in A.R.S. § 36-451.
- ~~4-5.~~ “Dentist” means an individual licensed under A.R.S. Title 32, Chapter 11, Article 2.
- ~~2-6.~~ “Department” means the Arizona Department of Health Services.
- ~~3-7.~~ “Diagnosis” means the identification of a disease or injury, by an individual authorized by law to make the identification, ~~that is the cause of an individual’s current medical condition.~~
8. “Discharge” means the same as in A.A.C. R9-10-201.
9. “Discharge date” means the month, day, and year when an individual is discharged from a hospital.
10. “Electronic” means the same as in A.R.S. § 44-7002.
11. “Health care institution” means the same as in A.A.C. R9-10-101.
- ~~4-12.~~ “Hospital” means the same as in A.A.C. R9-10-201.
- ~~5-13.~~ “ICD-9-CM” means the version of the ICD-9-CM: International Classification of Diseases codes used by a hospital for billing purposes.
14. “Medical services” means the same as in A.R.S. § 36-401.
15. “Pathology laboratory” means a facility in which human cells, body fluids, or tissues are examined for the purpose of diagnosing diseases and that is licensed under 9 A.A.C. 10, Article 1.
- ~~6-16.~~ “Physician” means an individual licensed as a doctor of allopathic medicine under A.R.S. Title 32, Chapter 13, or as a doctor of osteopathic medicine under A.R.S. Title 32, Chapter 17.
17. “Physician assistant” means the same as in A.R.S. § 32-2501.
18. “Registered nurse practitioner” means an individual who meets the definition of registered nurse practitioner in A.R.S. § 32-1601, and is licensed under A.R.S. Title 32, Chapter 15.
19. “Treatment” means the same as in A.A.C. R9-10-101.

ARTICLE 2. PESTICIDE ILLNESS

R9-4-201. Definitions

In this Article, unless otherwise specified:

- ~~1.~~ “Cluster illness” means ~~sickness in two or more individuals that is caused by or may be related to one pesticide exposure incident, as determined by the history, signs, or symptoms of the sickness; laboratory findings regarding the individuals; the individuals’ responses to treatment for the sickness; or the geographic proximity of the individuals.~~
1. “Cluster illness” means pesticide illness in two or more individuals that is caused by or may be related to one pesticide exposure incident.
2. “Defoliant” means the same as in A.R.S. § 3-341.
3. “Desiccant” means the same as in A.R.S. § 3-341.
- ~~2.4.~~ “Documented” means ~~evidenced by written information such as pesticide applicator reports, statements of individuals with pesticide illness, or medical records.~~
- ~~3.5.~~ “Health care professional” means a physician, a registered nurse practitioner, a physician assistant, or any other individual who is authorized by law to diagnose human illness.
- ~~4.6.~~ “Medical director” means the individual designated by a poison control center as responsible for providing medical direction for the poison control center or for approving and coordinating the activities of the individuals who provide medical direction for the poison control center.
- ~~5.~~ “Pest” ~~has the same meaning as in A.R.S. Title 3, Chapter 2, Article 5 or as used in A.R.S. Title 3, Chapter 2, Article 6 and A.R.S. Title 32, Chapter 22.~~
7. “Pest” means any organism that is subject to eradication or control under A.R.S. Title 3, Chapter 2, or A.R.S. Title 32, Chapter 22, including:
 - a. “Pest,” as defined in A.R.S. § 3-341;
 - b. “Pests,” as defined in A.R.S. § 3-201;
 - c. “Household pests,” as defined in A.R.S. § 32-2301; and
 - d. “Wood-destroying insects,” as defined in A.R.S. § 32-2301.
- ~~6.~~ “Pesticide” means ~~any substance or mixture of substances, including inert ingredients, intended for preventing, destroying, repelling, or mitigating any pest or intended for use as a plant regulator, defoliant, or desiccant, but does not include an antimicrobial agent, such as a disinfectant, sanitizer, or deodorizer, used for cleaning.~~
8. “Pesticide” means any substance or mixture of substances that is:
 - a. Intended for use:
 - i. In preventing, destroying, repelling, or mitigating any pest; or

- ii. As a plant regulator, defoliant, or desiccant; and
 - b. Is not intended for use in cleaning, such as a disinfectant, sanitizer, or deodorizer.
 - 7.9. "Pesticide illness" means any sickness reasonably believed by a health care professional or medical director to be caused by or related to ~~documented~~ exposure to any pesticide, based upon professional judgment and:
 - a. The history, signs, or symptoms of the sickness;
 - b. Laboratory findings regarding the individual; or
 - c. The individual's response to treatment for the sickness.
 - 8. ~~"Physician assistant" has the same meaning as in A.R.S. § 32-2501.~~
 - 10. "Plant regulator" means the same as in A.R.S. § 3-341.
 - 9.11. "Poison control center" means an organization that is a member of and may be certified by the American Association of Poison Control Centers.
 - 10. ~~"Registered nurse practitioner" has the same meaning as in A.R.S. § 32-1601.~~

R9-4-202. Pesticide Illness Reporting Requirements

~~A health care professional or medical director who participates in the diagnosis of or identifies an individual with pesticide illness shall file a report of pesticide illness with the Department as follows:~~

- ~~1. The health care professional or medical director shall report a pesticide illness within five working days from the date of diagnosis or identification, except:
 - a. The health care professional or medical director shall report a pesticide illness where the individual with pesticide illness is hospitalized or dies no later than one working day from the time of hospital admission or death; and
 - b. The health care professional or medical director shall report cluster illnesses no later than one working day from the time the second individual with pesticide illness is diagnosed or identified.~~
- 2. The health care professional or medical director shall submit the report to the Department by telephone; in person; in a writing sent by fax, delivery service, or mail; or by an electronic reporting system if an electronic reporting system is developed by the Department. The report shall contain the following information:
 - a. The name, address, and telephone number of the individual with pesticide illness;
 - b. The date of birth of the individual with pesticide illness;
 - c. The gender of the individual with pesticide illness;
 - d. The occupation of the individual with pesticide illness, if the documented pesticide exposure is related to the occupation;
 - e. The dates of onset of illness and of diagnosis or identification as pesticide illness;

- ~~f. The name of the pesticide, if known;~~
 - ~~g. The name, business address, and telephone number of the health care professional or medical director making the report;~~
 - ~~h. A statement specifying whether the illness is caused by a documented pesticide exposure or is related to a documented pesticide exposure; and~~
 - ~~i. The health care professional's or medical director's reason for believing that the illness is caused by or related to documented exposure to a pesticide.~~
- ~~3. The health care professional or medical director may designate a representative to make the report to the Department on behalf of the health care professional or medical director.~~
- A.** A health care professional or medical director who believes that an individual has pesticide illness shall submit a report to the Department, either personally or through a representative:
 - 1. Except as specified in subsections (A)(2) and (B), within five business days after the health care professional or medical director determines that the individual may have pesticide illness; and
 - 2. Within one business day after the individual is admitted to a hospital or dies due to pesticide illness.
- B.** A health care professional or medical director who believes that an individual is part of a cluster illness shall submit a report to the Department, either personally or through a representative, within one business day after determining that the individual has pesticide illness.
- C.** A health care professional or medical director shall ensure that the report required in subsection (A) or (B) includes the following information:
 - 1. The name, address, and telephone number of the individual with pesticide illness;
 - 2. The date of birth of the individual with pesticide illness;
 - 3. The gender, race, and ethnicity of the individual with pesticide illness;
 - 4. The date symptoms of pesticide illness began;
 - 5. The date the health care professional or medical director determined that the individual may have pesticide illness;
 - 6. The occupation of the individual with pesticide illness;
 - 7. The name of the pesticide, if known;
 - 8. The symptoms reported by the individual with pesticide illness;
 - 9. Whether any laboratory tests were performed for the individual with pesticide illness and, if so, for each test:
 - a. The type of specimen collected,
 - b. The date the specimen was collected,

- c. The type of test performed,
 - d. The results of the test, and
 - e. What results of the test would be considered normal;
 - 10. A description of any treatment provided to the individual with pesticide illness;
 - 11. The reasons the individual with pesticide illness is believed to have pesticide illness;
 - 12. A determination of how strongly the health care professional or medical director believes the individual has a pesticide illness;
 - 13. The name and telephone number of the health care professional or medical director who believes that the individual has pesticide illness;
 - 14. The name and address of the health care institution or poison control center at which the health care professional or medical director determined that the individual may have pesticide illness; and
 - 15. A description of the type of health care institution or poison control center specified in subsection (C)(13).
- D.** A health care professional or medical director shall submit the report required in subsection (A) or (B), either personally or through a representative:
- 1. By telephone;
 - 2. In person;
 - 3. In a document sent by fax, delivery service, or mail; or
 - 4. Through an electronic reporting system authorized by the Department.

ARTICLE 3. BLOOD LEAD LEVELS

R9-4-301. Definitions

In this Article, unless otherwise specified:

1. "Adult" means an individual 16 years of age or older.
2. "Child" means an individual younger than 16 years of age.
- ~~3. "Clinical laboratory" has the same meaning as in A.R.S. § 36-451.~~
- ~~4.3.~~ "Patient" means the individual whose blood has been tested for lead content.
- ~~5.4.~~ "Public" means funded by and operated under the direction of the federal or state government or a political subdivision of the state.
6. ~~"Public insurance" means a public program, such as the Arizona Health Care Cost Containment System, Kids Care, Indian Health Services, or TRICARE, that pays for medical services.~~
- ~~7.5.~~ "Whole blood" means human blood from which plasma, erythrocytes, leukocytes, and thrombocytes have not been separated.

R9-4-302. ~~Reporting Significant Blood Lead Levels~~ Level Reporting Requirements

- ~~A.~~ A physician who receives a laboratory result showing a level of lead equal to or greater than 10 micrograms of lead per deciliter of whole blood for a child or 25 micrograms of lead per deciliter of whole blood for an adult shall report the blood lead level to the Department as follows:
- ~~1.~~ The physician shall report the blood lead level within five working days from the date of receipt of the laboratory result if the blood lead level is less than 45 micrograms of lead per deciliter of whole blood for a child or less than 60 micrograms of lead per deciliter of whole blood for an adult.
 - ~~2.~~ The physician shall report the blood lead level within one working day from the date of receipt of the laboratory result if the blood lead level is equal to or greater than 45 micrograms of lead per deciliter of whole blood for a child or equal to or greater than 60 micrograms of lead per deciliter of whole blood for an adult.
 - ~~3.~~ A physician may designate a representative to make the report to the Department on behalf of the physician.
- ~~B.~~ A clinical laboratory director shall report to the Department the results of all tests for lead in whole blood as follows:
- ~~1.~~ The clinical laboratory director shall report the blood lead test result within five working days from the date of completing the test if the blood lead level is equal to or greater than 10 but less than 45 micrograms of lead per deciliter of whole blood for a child or equal to

- or greater than 25 but less than 60 micrograms of lead per deciliter of whole blood for an adult.
2. The clinical laboratory director shall report the blood lead test result within one working day from the date of completing the test if the blood lead level is equal to or greater than 45 micrograms of lead per deciliter of whole blood for a child or equal to or greater than 60 micrograms of lead per deciliter of whole blood for an adult.
 3. The clinical laboratory director shall report blood test results that are less than 10 micrograms of lead per deciliter of whole blood for a child or less than 25 micrograms of lead per deciliter of whole blood for an adult at least once each month.
 4. A clinical laboratory director may designate a representative to make the report to the Department on behalf of the clinical laboratory director.
- C.** A physician or clinical laboratory director shall submit each report to the Department by telephone; in a writing sent by fax, delivery service, or mail; or by an electronic reporting system authorized by the Department.
- D.** A report shall include the following information:
1. The patient's name, address, and telephone number;
 2. The patient's date of birth;
 3. The patient's gender;
 4. If the patient is an adult, the patient's occupation and the name, address, and telephone number of the patient's employer;
 5. An indication of the patient's funding source and the specific health plan name, if applicable:
 - a. Public insurance,
 - b. Private insurance,
 - c. Self-pay,
 - d. Workplace monitoring program,
 - e. Other, or
 - f. Unknown;
 6. The type of blood draw used (venous or capillary);
 7. The date the blood was drawn;
 8. The blood lead level;
 9. The date the blood lead level was received by the physician or determined by the laboratory;
 10. The name, address, and telephone number of the laboratory that tested the blood; and

~~11. The name, practice name, address, and telephone number of the physician who ordered the test.~~

A. For each patient, a physician shall submit a report to the Department, either personally or through a representative, for the levels of lead and within the time periods specified in Table 3-A.

Table 3-A: Criteria for Physician Reporting of Blood Lead Levels

	Child	Adult
Within One Business Day After Receiving Laboratory Result	≥ 45 µg of lead per dL of whole blood	≥ 60 µg of lead per dL of whole blood
Within Five Business Days After Receiving Laboratory Result	≥ 10 µg to < 45 µg of lead per dL of whole blood	≥ 25 µg to < 60 µg of lead per dL of whole blood

B. For each blood lead level test, a clinical laboratory director shall submit a report to the Department, either personally or through a representative, for the levels of lead and within the time periods specified in Table 3-B.

Table 3-B: Criteria for Clinical Laboratory Director Reporting of Blood Lead Levels

	Child	Adult
Within One Business Day After Completing the Test	≥ 45 µg of lead per dL of whole blood	≥ 60 µg of lead per dL of whole blood
Within Five Business Days After Completing the Test	≥ 10 µg to < 45 µg of lead per dL of whole blood	≥ 25 µg to < 60 µg of lead per dL of whole blood
At Least Once Each Month	< 10 µg of lead per dL of whole blood	< 25 µg of lead per dL of whole blood

C. A physician shall ensure that the report required in subsection (A) includes the following information:

1. The patient's name, address, and telephone number;
2. The patient's date of birth;
3. The patient's gender, race, and ethnicity;
4. If the patient is an adult, the patient's occupation and the name, address, and telephone number of the patient's employer;
5. If the patient is a child, the name of the patient's parent or guardian;

6. Whether the language spoken in the patient's home is English, Spanish, or another language;
7. The funding source for the medical services provided to the patient and, if applicable, the name of the patient's health plan and the identification number for the patient assigned by the health plan;
8. Whether the blood collected from the patient was venous blood or capillary blood;
9. The date the blood was collected;
10. The results of the blood lead level test;
11. The date of the test result;
12. The date the physician received the test result;
13. The name, address, and telephone number of the laboratory that tested the blood; and
14. The name, practice name, address, and telephone number of the physician who ordered the test.

D. A clinical laboratory director shall ensure that the report required in subsection (B) includes the following information:

1. The patient's name, address, and telephone number;
2. The patient's date of birth;
3. The patient's gender, race, and ethnicity;
4. If the patient is an adult, the patient's occupation and the name, address, and telephone number of the patient's employer;
5. The name, practice name, address, and telephone number of the physician who ordered the test;
6. Whether the blood collected from the patient was venous blood or capillary blood;
7. The date the blood was collected;
8. The results of the blood lead level test;
9. The date of the test result;
10. The name and address of the clinical laboratory that tested the blood; and
11. The name and telephone number of the clinical laboratory director.

E. A physician or clinical laboratory director shall submit the report required in subsection (A) or (B), either personally or through a representative:

1. By telephone;
2. In person;
3. In a document sent by fax, delivery service, or mail; or
4. Through an electronic reporting system authorized by the Department.

ARTICLE 4. CANCER REGISTRY

R9-4-401. Definitions

In this Article, unless otherwise specified:

1. "Accession number" means a unique number, separate from a medical record number, assigned by a hospital's cancer registry to a patient for identification purposes.
- ~~2.~~ ~~"Admitted" means the same as in A.A.C. R9-10-201.~~
- ~~3-2.~~ "Analytic patient" means a patient, who is:
 - a. Diagnosed at a facility, or
 - b. Administered any part of a first course of treatment at the facility.
- ~~4-3.~~ "Basal cell" means a cell of the inner-most layer of the skin.
- ~~5-4.~~ "Behavioral health service agency" means the same as "agency" in A.A.C. R9-20-101.
- ~~6.~~ ~~"Business day" means any day of the week other than a Saturday, a Sunday, a legal holiday, or a day on which the Department is authorized or obligated by law or executive order to close.~~
- ~~7.~~ ~~"Calendar day" means any day of the week, including a Saturday or a Sunday.~~
- ~~8-5.~~ "Calendar year" means January 1 through December 31.
- ~~9-6.~~ "Cancer" means a group of diseases characterized by uncontrolled cell growth and the spread of abnormal cells.
- ~~10-7.~~ "Cancer registry" means a unit within a hospital or clinic that collects, stores, summarizes, distributes, and maintains information specified in R9-4-403 about patients who:
 - a. Are admitted to the hospital;
 - b. Receive diagnostic evaluation at, or cancer-directed treatment from, the hospital or clinic; or
 - c. Show evidence of cancer, carcinoma in situ, or a benign tumor of the central nervous system while receiving treatment from the hospital or clinic.
- ~~11-8.~~ "Carcinoma" means a type of cancer that is characterized as a malignant tumor derived from epithelial tissue.
- ~~12-9.~~ "Carcinoma in situ" means a cancer that is confined to epithelial tissue within the site of origin.
- ~~13-10.~~ "Case report" means an electronic or paper document that includes the information in R9-4-403 for a patient.
- ~~14-11.~~ "Chemotherapy" means the treatment of cancer using specific chemical agents or drugs that are selectively destructive to malignant cells and tissues.

- ~~15-12.~~ “Clinic” means a facility that is not physically connected to or affiliated with a hospital, where a physician, doctor of naturopathic medicine, dentist, or registered nurse practitioner provides cancer diagnosis, cancer treatment, or both, and that is:
- a. An outpatient treatment center, as defined in A.A.C. R9-10-101~~5~~₂;
 - b. An outpatient surgical center, as defined in A.A.C. R9-10-101~~5~~₂; or
 - c. An outpatient radiation treatment center.
- ~~16-13.~~ “Clinical evaluation” means an examination of the body of an individual for the presence of disease or injury to the body, and review of any laboratory test results for the individual by a physician, doctor of naturopathic medicine, dentist, or registered nurse practitioner.
- ~~17-14.~~ “Clinical or pathological” means an analysis of evidence either acquired solely before a first course of treatment was initiated, or acquired both before a first course of treatment, and supplemented or modified by evidence acquired during and subsequent to surgery.
- ~~18-15.~~ “Code” means a single number or letter, a set of numbers or letters, or a set of both numbers and letters, that represents specific information.
- ~~19-16.~~ “Cytology” means the microscopic examination of cells.
- ~~20-17.~~ “Date of first contact” means the day, month, and year a reporting facility first began to provide cancer-related medical services, nursing services, or health-related services, as defined in A.R.S. § 36-401, to a patient.
- ~~21-18.~~ “Date of last contact” means the day, month, and year that a reporting facility last knew a patient to be alive.
- ~~22-19.~~ “Designee” means a person assigned by the governing authority of a hospital or clinic or by an individual acting on behalf of the governing authority to gather information for or report to the Department, as specified in R9-4-403 or R9-4-404.
- ~~23.~~ ~~“Discharge” means the same as in A.A.C. R9-10-201.~~
- ~~24.~~ ~~“Discharge date” means the month, day, and year when a patient is discharged from a hospital.~~
- ~~25-20.~~ “Disease progression” means the process of a disease becoming more severe or spreading from one area of a human body to another area of the human body.
- ~~26-21.~~ “Distant lymph node” means a lymph node that is not in the same general area of a human body as the primary site of a tumor.
- ~~27-22.~~ “Distant site” means an area of a human body that is not adjacent to or in the same general area of the human body as the primary site of a tumor.

- ~~28-23.~~ “Doctor of naturopathic medicine” means an individual licensed under A.R.S. Title 32, Chapter 14.
- ~~29.~~ ~~“Electronic” means the same as in A.R.S. § 44-7002.~~
- ~~30-24.~~ “First course of treatment” means the initial set of cancer- or non-cancer-directed treatment that is planned when a cancer is diagnosed and administered to the patient before disease progression or recurrence.
- ~~31-25.~~ “Follow-up report” means an electronic document that includes the information stated in R9-4-404(A)(2) for a patient.
- ~~32-26.~~ “Governing authority” means the same as in A.R.S. § 36-401.
- ~~33-27.~~ “Grade” means the degree of resemblance of a tumor to normal tissue, and gives an indication of the severity of the cancer.
- ~~34.~~ ~~“Health care institution” means the same as in A.A.C. R9-10-101.~~
- ~~35-28.~~ “Histology” means the microscopic structure of cells, tissues, and organs in relation to their function.
- ~~36-29.~~ “Inpatient beds” means the same as in A.R.S. § 36-401.
- ~~37-30.~~ “Laterality” means the side of a paired organ or the side of the body in which the primary site of a tumor is located.
- ~~38-31.~~ “Licensed capacity” means the same as in A.R.S. § 36-401.
- ~~39-32.~~ “Lymph” means the clear, watery, sometimes faintly yellowish fluid that circulates throughout the lymphatic system.
- ~~40-33.~~ “Lymph node” means any of the small bodies located along lymphatic vessels, particularly at the neck, armpit, and groin, that filter bacteria and foreign particles from lymph.
- ~~41-34.~~ “Lymphatic system” means the organ system that consists of lymph, lymph nodes, and vessels or channels that contain and convey lymph throughout a human body.
- ~~42-35.~~ “Malignant” means an inherent tendency of a tumor to sequentially spread to areas of a human body beyond the site of origin.
- ~~43-36.~~ “Medical record number” means a unique number assigned by a hospital, clinic, physician, doctor of naturopathic medicine, dentist, or registered nurse practitioner to an individual for identification purposes.
- ~~44-37.~~ “Melanocyte” means a skin cell that makes melanin, which is a dark pigment.
- ~~45-38.~~ “Melanoma” means a dark-pigmented, malignant tumor arising from a melanocyte and occurring most commonly in the skin.

- ~~46-39.~~ “Metastasis” means the spread of a cancer from a primary site into a regional site or a distant site.
- ~~47-40.~~ “Narrative description” means a written text describing an act, occurrence, or course of events.
- ~~48-41.~~ “Organ” means a somewhat independent part of a human body, such as a heart or a kidney, that performs a specific function.
- ~~49-42.~~ “Organ system” means one or more organs and associated tissues that perform a specific function, such as the circulatory system.
- ~~50-43.~~ “Outpatient radiation treatment center” means a facility in which a person, licensed as specified in 12 A.A.C. 1, Article 7, provides radiation treatment.
- ~~51-44.~~ “Papillary tumor” means a benign tumor of the skin producing finger-like projections from the skin surface.
- ~~52.~~ ~~“Pathology laboratory” means a facility in which human cells or tissues are examined for the purpose of diagnosing cancer and that is licensed under 9 A.A.C. 10, Article 1.~~
- ~~53-45.~~ “Patient” means an individual who has been diagnosed with a cancer, carcinoma in situ, or benign tumor of the central nervous system, including melanoma, but excluding skin cancer that is:
- a. Confined to the primary site; or
 - b. Present at regional sites or distant sites, but was diagnosed on or after January 1, 2003.
- ~~54-46.~~ “Primary site” means a specific organ or organ system within a human body where the first cancer tumor originated.
- ~~55-47.~~ “Principal diagnosis” means the primary condition for which an individual is admitted to a hospital or treated by the hospital.
- ~~56-48.~~ “Radiation treatment” means the exposure of a human body to a stream of particles or electromagnetic waves for the purpose of selectively destroying certain cells or tissues.
- ~~57-49.~~ “Reconstructive surgery” means a medical procedure that involves cutting into a body tissue or organ with instruments to repair damage or restore function to, or improve the shape and appearance of a body structure that is missing, defective, damaged, or misshapen by cancer or cancer-directed therapies.
- ~~58-50.~~ “Recurrence” means the reappearance of a tumor after previous removal or treatment of the tumor, after a period in which the patient was believed to be free of cancer.
- ~~59-51.~~ “Reference date” means the date on which the hospital’s cancer registry began reporting patient information to the Department.

- ~~60-52.~~ “Regional lymph node” means a lymph node that is in the same general area of a human body as the primary site of a tumor.
- ~~61-53.~~ “Regional site” means an area of a human body that is adjacent to or in the same general area of the human body as the primary site of a tumor.
- ~~62.~~ “~~Registered nurse practitioner~~” means an individual who meets the definition of ~~registered nurse practitioner in A.R.S. § 32-1601, and is licensed under A.R.S. Title 32, Chapter 15.~~
- ~~63-54.~~ “Rehabilitation services” means the same as in A.A.C. R9-10-201.
- ~~64-55.~~ “Release” means to transfer care of a patient from a hospital to a physician, a doctor of naturopathic medicine, a registered nurse practitioner, an outpatient treatment center, another hospital, the patient, the patient’s parent if the patient is under 18 years of age and unmarried, or the patient’s legal guardian.
- ~~65-56.~~ “Reporting facility” means a hospital, clinic, physician, doctor of naturopathic medicine, dentist, or registered nurse practitioner that submits a case report to the Department.
- ~~66-57.~~ “Secondary diagnosis” means all other diagnoses of an individual made after the principal diagnosis.
- ~~67-58.~~ “Sequence number” means a unique number assigned by a cancer registry to a specific cancer within the body of a patient.
- ~~68-59.~~ “Skin cancer” means cancer of any of the following types:
- a. Papillary tumor;
 - b. Squamous cell;
 - c. Basal cell; or
 - d. Other carcinoma of the skin, where a specific diagnosis has not been determined.
- ~~69-60.~~ “Special hospital” means the same as in A.A.C. R9-10-201.
- ~~70-61.~~ “Squamous cell” means a flat, scale-like skin cell.
- ~~71-62.~~ “Stage group” means a scheme for categorizing a patient, based on the staging classification of the patient’s cancer, to enable a physician, doctor of naturopathic medicine, or registered nurse practitioner to provide better treatment and outcome information to the patient.
- ~~72-63.~~ “Staging classification” means the categorizing of a cancer according to the size and spread of a tumor from its primary site, based on an analysis of three basic components:
- a. The tumor at the primary site,
 - b. Regional lymph nodes, and
 - c. Metastasis.

- ~~73-64.~~ “Subsite” means a specific area within a primary site where a cancer tumor originated.
- ~~74.~~ “~~Substantiate stage~~” means ~~a narrative describing the stage group of a cancer at the time of diagnosis.~~
- ~~75.~~ “~~Treatment~~” means ~~the administration to a patient of medical services, nursing services, or health related services, as defined in A.R.S. § 36-401, that are intended to relieve illness or injury.~~
- ~~76-65.~~ “Tumor” means an abnormal growth of tissue resulting from uncontrolled multiplication of cells and serving no physiological function.
- ~~77-66.~~ “Usual industry” means the primary type of activity carried out by the business where a patient was employed for the most number of years of the patient’s working life before the diagnosis of cancer.
- ~~78-67.~~ “Usual occupation” means the kind of work performed during the most number of years of a patient’s working life before the diagnosis of cancer.
- ~~79-68.~~ “Working life” means that portion of a patient’s life during which the patient was employed for a salary or wages.

ARTICLE 5. BIRTH DEFECTS MONITORING PROGRAM

R9-4-501. Definitions

In this Article, unless otherwise specified:

- ~~1.~~ “~~Admitted~~” means the same as in A.A.C. ~~R9-10-201~~.
- ~~2.~~1. “Birth defect” means an abnormality:
 - a. Of body structure, function, or chemistry, or of chromosomal structure or composition;
 - b. That is present at or before birth; and
 - c. That may be diagnosed before or at birth, or later in life.
- ~~3.~~ “~~Business day~~” means ~~any day of the week other than a Saturday, a Sunday, a legal holiday, or a day on which the Department is authorized or obligated by law or executive order to close.~~
- ~~4.~~ “~~Calendar day~~” means ~~any day of the week, including a Saturday or a Sunday.~~
- ~~5.~~2. “Clinic” means:
 - a. A person under contract or subcontract with CRS to provide the medical services specified in 9 A.A.C. 7, Article 4;
 - b. An outpatient treatment center, as defined in A.A.C. R9-10-101~~;~~₂; or
 - c. An outpatient surgical center, as defined in A.A.C. R9-10-101.
- ~~6.~~3. “Clinical evaluation” means an examination of the body of an individual and review of the individual’s laboratory test results to determine the presence or absence of a medical condition.
- ~~7.~~ “~~Clinical laboratory~~” means ~~a facility that:~~
 - ~~a. Meets the definition in A.R.S. § 36-451;~~
 - ~~b. Is operated, licensed, or certified by the U.S. government; and~~
 - ~~c. Is located within Arizona.~~
- ~~8.~~4. “Code” means a single number or letter, a set of numbers or letters, or a set of both numbers and letters, that represents specific information.
- ~~9.~~5. “Conception” means the formation of an entity by the union of a human sperm and ovum, resulting in a pregnancy.
- ~~10.~~6. “Co-twin” means a sibling of a patient, who was born to the same mother as the patient and as a result of the same pregnancy as the patient.
- ~~11.~~7. “CRS” means the Children’s Rehabilitative Services program, established within the Department as specified in A.R.S. Title 36, Chapter 2, Article 3.

- ~~12.8.~~ “Date of first contact” means the day, month, and year a physician, clinic, or other person specified in R9-4-503(A) first began to provide medical services, nursing services, or health-related services to a patient or the patient’s mother.
- ~~13.9.~~ “Date of last contact” means the day, month, and year:
- a. Of a patient’s death; or
 - b. That a physician, clinic, or other person specified in R9-4-503(A) last clinically evaluated, diagnosed, or provided treatment to a patient or the patient’s mother.
- ~~14.10.~~ “Designee” means an individual assigned by the governing power of a hospital, high-risk perinatal practice, genetic testing facility, or prenatal diagnostic facility or by another individual acting on behalf of the governing power to gather information for or report to the Department, as specified in R9-4-502, R9-4-503, or R9-4-504.
- ~~15.~~ ~~“Discharge” means the same as in A.A.C. R9-10-201.~~
- ~~16.~~ ~~“Discharge date” means the month, day, and year of an individual’s discharge from a hospital.~~
- ~~17.~~ ~~“Electronic” means the same as in A.R.S. § 44-7002.~~
- ~~18.11.~~ “Enrolled” means approved to receive services specified in 9 A.A.C. Chapter 7 from CRS.
- ~~19.12.~~ “Estimated date of confinement” means an approximation of the date on which a woman will give birth, based on the clinical evaluation of the woman.
- ~~20.13.~~ “Estimated gestational age” means an approximation of the duration of a pregnancy, based on the date of the last menstrual period of the pregnant woman.
- ~~21.14.~~ “Facility” means a building and associated personnel and equipment that perform or are used in connection with performing a particular service or activity.
- ~~22.15.~~ “Family medical history” means an account of past and present illnesses or diseases experienced by individuals who are biologically related to a patient.
- ~~23.16.~~ “Follow-up services” means activities intended to assist the parent or guardian of a patient who has a birth defect to:
- a. Learn about the birth defect and, if applicable, how the birth defect may be prevented; or
 - b. Obtain applicable medical services, nursing services, health-related services, or support services.
- ~~24.17.~~ “Genetic condition” means a disease or other abnormal state present at birth or before birth, as a result of an alteration of DNA, that impairs normal physiological functioning of a human body.

- ~~25-18.~~ “Genetic testing facility” means an organization, institution, corporation, partnership, business, or entity that conducts tests to detect, analyze, or diagnose a genetic condition in an individual, including an evaluation to determine the structure of an individual’s chromosomes.
- ~~26-19.~~ “Governing power” means the individual, agency, group, or corporation appointed, elected, or otherwise designated, in which the ultimate responsibility and authority for the conduct of a hospital, high-risk perinatal practice, genetic testing facility, or prenatal diagnostic facility are vested.
- ~~27-20.~~ “Guardian” means an individual appointed as a legal guardian by a court of competent jurisdiction.
- ~~28-21.~~ “Health-related services” means the same as in A.R.S. § 36-401.
- ~~29-22.~~ “High-risk perinatal practice” means a clinic or physician that routinely provides medical services prenatally to a patient or a patient’s mother with perinatal risk factors to prevent, clinically evaluate, diagnose, or treat the patient for a possible birth defect.
- ~~30-23.~~ “Log” means a chronological list of individuals for or on whom medical services, nursing services, or health-related services were provided by a designated unit of a hospital or by another person specified in R9-4-503(A).
- ~~31-24.~~ “Medical condition” means a disease, injury, other abnormal physiological state, or pregnancy.
- ~~32-25.~~ “Medical records” means the same as in A.R.S. § 12-2291.
- ~~33-26.~~ “Medical record number” means a unique number assigned by a hospital, clinic, physician, or registered nurse practitioner to an individual for identification purposes.
- ~~34.~~ ~~“Medical services” means the same as in A.R.S. § 36-401.~~
- ~~35-27.~~ “Midwife” means an individual licensed under A.R.S. Title 36, Chapter 6, Article 7, or certified under A.R.S. Title 32, Chapter 15.
- ~~36-28.~~ “Mother” means the woman:
- a. Who is pregnant with or gives birth to a patient, or
 - b. From whose fertilized egg a patient develops.
- ~~37-29.~~ “Multiple gestation” means a pregnancy in which a patient is not the only fetus carried in a mother’s womb.
- ~~38-30.~~ “Nursing services” means the same as in A.R.S. § 36-401.
- ~~39-31.~~ “Ordered” means instructed by a physician, registered nurse practitioner, or physician assistant to perform a test on an individual.
- ~~40-32.~~ “Parent” means the:

- a. Biological or adoptive father of an individual; or
 - b. Woman who:
 - i. Is the mother of an individual; or
 - ii. Adopts an individual.
41. ~~“Pathology laboratory” means a facility in which human cells, body fluids, or tissues are examined for the purpose of diagnosing diseases and that is licensed under 9 A.A.C. 10, Article 1.~~
- 42.33. “Patient” means an individual, regardless of current age:
- a. Who, from conception to one year of age, was clinically evaluated for a possible birth defect or a medical condition that may be related to a birth defect:
 - i. ~~By:~~
 - (1) ~~A physician,~~
 - (2) ~~A midwife,~~
 - (3) ~~A registered nurse practitioner, or~~
 - (4) ~~A physician assistant; or~~
 - ii. ~~At a hospital or clinic;~~
 - i. By a physician.
 - ii. By a midwife.
 - iii. By a registered nurse practitioner.
 - iv. By a physician assistant; or
 - v. At a hospital or clinic;
 - b. Whose mother was clinically evaluated during her pregnancy with the individual:
 - i. For a medical condition that may be related to a possible birth defect, and
 - ii. By an individual or facility specified in ~~subsection (42)(a)~~ subsection (33)(a);
 - c. Who, from conception to one year of age, was tested by a genetic testing facility or other clinical laboratory;
 - d. Whose mother was tested during her pregnancy with the individual by a:
 - i. Genetic testing facility or other clinical laboratory, or
 - ii. Prenatal diagnostic facility; or
 - e. Who, from conception to one year of age, was provided treatment or whose mother during her pregnancy with the individual was provided treatment by a hospital, clinic, physician, registered nurse practitioner, or other person specified

in R9-4-503(A) for a medical condition that may be related to a possible birth defect.

- ~~43.~~34. “Perinatal risk factor” means a situation or circumstance that may increase the chance of an individual being born with a birth defect, such as:
- a. A family medical history of birth defects or other medical conditions;
 - b. The exposure of the individual or the individual’s mother or biological father to radiation, medicines, chemicals, or diseases before the individual’s birth; or
 - c. An abnormal result of a test performed for the individual or the individual’s mother by a prenatal diagnostic facility or clinical laboratory, including a genetic testing facility.
- ~~44.~~ “~~Physician assistant~~” ~~means an individual licensed under A.R.S. Title 32, Chapter 25.~~
- ~~45.~~35. “Prenatal diagnostic facility” means an organization, institution, corporation, partnership, business, or entity that conducts diagnostic ultrasound or other medical procedures that may diagnose a birth defect in a human being.
- ~~46.~~36. “Principal diagnosis” means the primary reason for which an individual is:
- a. Admitted to a hospital;
 - b. Treated by a hospital, clinic, physician, registered nurse practitioner, or physician assistant; or
 - c. Tested by a genetic testing facility or prenatal diagnostic facility.
- ~~47.~~37. “Procedure” means a set of activities performed on a patient or the mother of a patient that:
- a. Are invasive;
 - b. Are intended to diagnose or treat a disease, illness, or injury;
 - c. Involve a risk to the patient or patient’s mother from the activities themselves or from anesthesia; and
 - d. Require the individual performing the set of activities to be trained in the set of activities.
- ~~48.~~38. “Refer” means to provide direction to an individual or the individual’s parent or guardian to obtain medical services or a test for assessment, diagnosis, or treatment of a birth defect or other medical condition.
- ~~49.~~ “~~Registered nurse practitioner~~” ~~means an individual who meets the definition of registered nurse practitioner in A.R.S. § 32-1601, and is licensed under A.R.S. Title 32, Chapter 15.~~
- ~~50.~~39. “Routinely” means occurring in the regular or customary course of business.

- ~~51.40.~~ “Secondary diagnosis” means all other diagnoses for an individual besides the principal diagnosis.
- ~~52.41.~~ “Singleton gestation” means a pregnancy in which a patient is the only fetus carried in a mother’s womb.
- ~~53.42.~~ “Support services” means activities, not related to the diagnosis or treatment of a birth defect, intended to maintain or improve the physical, mental, or psychosocial capabilities of a patient or those individuals biologically or legally related to the patient.
- ~~54.43.~~ “Surgical procedure” means making an incision into an individual’s body for the:
- a. Correction of a deformity or defect;
 - b. Repair of an injury;
 - c. Excision of a part of the individual’s body; or
 - d. Diagnosis, amelioration, or cure of a disease.
- ~~55.44.~~ “Test” means:
- a. An analysis performed on body fluid, tissue, or excretion by a genetic testing facility or other clinical laboratory to evaluate for the presence or absence of a disease; or
 - b. A procedure performed on the body of a patient or the patient’s mother that may be used to evaluate for the presence or absence of a birth defect.
- ~~56.45.~~ “Transfer” means for a hospital to discharge a patient or the patient’s mother and send the patient or the patient’s mother to another hospital for inpatient medical services without the intent that the patient or the patient’s mother will return to the sending hospital.
- ~~57.~~ ~~“Treatment” means the same as in A.A.C. R9-10-101.~~
- ~~58.46.~~ “Unit” means an area of a hospital designated to provide an organized service, as defined in A.A.C. R9-10-201.